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7590 03/30/2006
 Bayer Pharmaceuticals Corporation
 400 Morgan Lane
 West Haven, CT 06516

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Susan M. Pellegrino <i>Susan M. Pellegrino</i> June 23, 2006	(Depositor's name) (Signature) (Date)
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/521,538	08/01/2005	Achim Feurer	LE A 35 926	8774

TITLE OF INVENTION: 2,5-DISUBSTITUTED PYRIMIDINE DERIVATIVES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	06/30/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS	06/26/2006 TBESHAK2 08000042 133372	10521538	
RAO, DEEPAK R	1624	514-211090	01 FC:1501	1400.00 DA	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Susan M. Pellegrino
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Bayer HealthCare AG

Leverkusen, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies _____

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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-3372 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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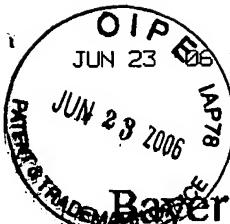
Authorized Signature *Susan M. Pellegrino*
 Susan M. Pellegrino
 Typed or printed name

Date June 23, 2006

Registration No. 48,972

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**Bayer HealthCare**
Pharmaceuticals

To **Commissioner for Patents**
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P.O. Box 1450
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Fax (571) 273-2885 Pages 5 (including cover sheet)
Date June 23, 2006
From Susan M. Pellegrino
Fax (203) 812-6459 Tel. (203) 812-6450
Re U.S. Patent Application Serial No.: 10/521,538

Bayer Pharmaceuticals
Corporation

400 Morgan Lane
West Haven, CT 06516

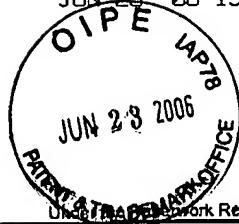
Phone: (203) 812-6450
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susan.pellegrino.b@bayer.com

For U.S. Patent Application Serial No. 10/521,538

- 1) Part B- Fee(s) Transmittal (Form PTOL-85) [IN DUPLICATE]
- 2) Issue Fee Transmittal Letter
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- 4) Fax Cover Sheet

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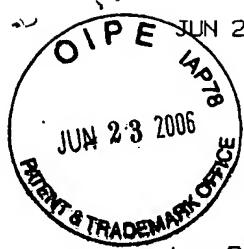
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For U.S. Patent Application Serial No. 10/521,538

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This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.8 minutes to complete, including the gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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In re Patent Application of Achim Feurer, et al.

Serial No.: 10/521,538

Group Art Unit: 1624

Filed: August 1, 2005

Examiner: Deepak R. Rao

For: 2,5-Disubstituted Pyrimidine Derivatives

CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. 1.8(a)

I hereby certify that this correspondence and any papers referred to as attached are being facsimile transmitted, on the date shown below, to the U.S. Patent and Trademark Office, Mail Stop ISSUE FEE, facsimile number (571) 273-2885.

Date: June 23, 2006

Susan M. Pellegrino
Susan M. Pellegrino

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MAIL STOP ISSUE FEE
Commissioner for Patents
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Alexandria, VA 22313-1450

Sir:

Attached please find the following documents in connection with transmittal and payment of the issue fees in the above-identified case:

- Part B - Fee(s) Transmittal (Form PTOL-85) [IN DUPLICATE]; and
- Certificate of Transmission under 37 CFR 1.8.

Respectfully submitted,

Susan M. Pellegrino
Susan M. Pellegrino
Attorney for Applicants
Reg. No.48,972

Date: June 23, 2006

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